

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Massachusetts Republican State Congressional Committee

ADDRESS (number and street)

85 Merrimac Street, Suite 400

Check if different
than previously
reported. (ACC)

Boston

MA

02114

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00042622

3. IS THIS
REPORTNEW
(N)**OR**AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15
Quarterly Report(Q1)July 15
Quarterly Report(Q2)October 15
Quarterly Report(Q3)January 31
Quarterly Report(YE)July 31 Mid-Year
Report(Non-election
Year Only) (MY)Termination Report
(TER)(b) Monthly
Report
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)
(Non-Election
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)
(Non-Election
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

11

07

2006

in the
State of

MA

5. Covering Period

10

19

2006

through

11

27

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brent Andersen

Signature of Treasurer

Electronically Filed by Brent Andersen

Date

04

19

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		62748.60
(b) Cash on Hand at Beginning of Reporting Period	61297.15	
(c) Total Receipts (from Line 19)	117775.02	2347559.52
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	179072.17	2410308.12
7. Total Disbursements (from Line 31)	148257.60	2379493.55
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30814.57	30814.57
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	1	9	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	1	2	7	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	105225.00	2000850.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	7106.45	206019.94
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	112331.45	2206869.94
(b) Political Party Committees	0.00	50.00
(c) Other Political Committees (such as PACs)	5000.00	108450.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➡	117331.45	2315369.94
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	443.57	5910.38
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	26279.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	117775.02	2347559.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	117775.02	2347559.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	88031.06	1547174.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	88031.06	1547174.96
22. Transfers to Affiliated/Other Party Committees.....	7500.00	415550.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	52726.54	416768.59
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	52726.54	416768.59
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	148257.60	2379493.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	148257.60	2379493.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	117331.45	2315369.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	117331.45	2315369.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	88031.06	1547174.96
37. Offsets to Operating Expenditures (from Line 15, page 3)	443.57	5910.38
38. Net Operating Expenditures (subtract Line 37 from Line 36)	87587.49	1541264.58

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

William Adams Jr.

Mailing Address PO BOX 550

City State Zip Code
 North Easton MA 02356

FEC ID number of contributing
federal political committee.

C

Name of Employer
ACS Systems

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162576

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Paul Afonso

Mailing Address 14 Meredith Street

City State Zip Code
 Boston MA 02132

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: 61205.C162736

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Phil Albert

Mailing Address 53 Potato Rd

City State Zip Code
 Westminster MA 01473

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162578

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7 / 75

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Elliot Baines Mailing Address 360 Indian Harbor Rd. City State Zip Code Vero Beach FL 32963 FEC ID number of contributing federal political committee. C Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>500.00</div>		Date of Receipt <div>MM / DD / YYYY</div> <div>11 / 01 / 2006</div> Transaction ID: 61205.C162735 Amount of Each Receipt this Period <div>500.00</div> Receipt
B. Full Name (Last, First, Middle Initial) Cheryl Benton Mailing Address 18 Bypass Road City State Zip Code Lincoln MA 01773 FEC ID number of contributing federal political committee. C Name of Employer Homemaker Occupation Homemaker Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>2500.00</div>		Date of Receipt <div>MM / DD / YYYY</div> <div>10 / 30 / 2006</div> Transaction ID: 61205.C162585 Amount of Each Receipt this Period <div>2500.00</div> Receipt
C. Full Name (Last, First, Middle Initial) Harvey Bines Mailing Address 36 Clarke St City State Zip Code Lexington MA 02421 FEC ID number of contributing federal political committee. C Name of Employer Sullivan & Worcester Occupation Lawyer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>2000.00</div>		Date of Receipt <div>MM / DD / YYYY</div> <div>10 / 19 / 2006</div> Transaction ID: 61019.C162495 Amount of Each Receipt this Period <div>1000.00</div> Receipt

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Evelyn Brannen

Mailing Address 186 Linden St
Apt B

City State Zip Code
Needham MA 02492

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 1 / 2 0 0 6

Transaction ID: 61205.C162738

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Edgar Bristol

Mailing Address 28 Union St

City State Zip Code
Foxborough MA 02035

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162601

Amount of Each Receipt this Period

300.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paul Buonopane

Mailing Address 262 Lincoln Rd

City State Zip Code
Lincoln MA 01773

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162603

Amount of Each Receipt this Period

200.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
John Cabot
Mailing Address 1 Tucks Point Road

City State Zip Code
Manchester MA 01944

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Philanthropist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 6

Transaction ID: 61205.C162754

Amount of Each Receipt this Period

1500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Stephen Callahan
Mailing Address 80 First Street

City State Zip Code
Bridgewater MA 02324

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rubin and Rudman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162715

Amount of Each Receipt this Period

2500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Maria Carvalho
Mailing Address 90 Annie Moore Road

City State Zip Code
Bolton MA 01740

FEC ID number of contributing
federal political committee.

C

Name of Employer
Entwistle

Occupation
Panel wirer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162682

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

4100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Anthony Cassano

Mailing Address 3 Magnolia Drive

City State Zip Code
 Lynnfield MA 01940

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162581

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

B. Theodore Charles

Mailing Address 65 Eastern Point Blvd.

City State Zip Code
 Gloucester MA 01930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Investors Capital

Occupation
President/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6100.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 7 / 2 0 0 6

Transaction ID: 61205.C162782

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

C. Andrew Chesterton

Mailing Address 22 Mount Pleasant Street

City State Zip Code
 Winchester MA 01890-3043

FEC ID number of contributing
federal political committee.

C

Name of Employer
AW Chesterton Company

Occupation
VP and CIO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162638

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Fannye Coley

Mailing Address 32 Thornton St.

City State Zip Code
 Boston MA 02119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162647

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Kevin Conn

Mailing Address 230 MT. Vernon Street

City State Zip Code
 Newton MA 02465

FEC ID number of contributing
federal political committee.

C

Name of Employer
MFS Inv. Management

Occupation
Inv. Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162572

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Stephen J. Connolly

Mailing Address 152 Conant Street

City State Zip Code
 Beverly MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Connolly Brothers Inc

Occupation
Construction

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 6

Transaction ID: 61020.C162507

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Jon Cook

Mailing Address 15 Angela Way

City State Zip Code
 Barnstable MA 02668

FEC ID number of contributing
federal political committee.

C

Name of Employer
None

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 3 / 2 0 0 6

Transaction ID: 61205.C162748

Amount of Each Receipt this Period

50.00

Receipt

B. Full Name (Last, First, Middle Initial)

Michael Crossen

Mailing Address 97 Whitmar Road

City State Zip Code
 Barnstable MA 02635

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rubin & Rudman

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162714

Amount of Each Receipt this Period

2500.00

Receipt

C. Full Name (Last, First, Middle Initial)

James Cummings

Mailing Address 16 Popple Grove Road

City State Zip Code
 Harwich MA 02645

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 9 / 2 0 0 6

Transaction ID: 61019.C162499

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Donna Deprisco
Mailing Address 160 Commonwealth Ave

City State Zip Code
Boston MA 02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Deprisco Jewelers

Occupation
Owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 6

Transaction ID: 61205.C162812

Amount of Each Receipt this Period

450.00

In-Kind

trophy/ award for reception

B. Full Name (Last, First, Middle Initial)
Christopher Devany
Mailing Address 71 Moore Road

City State Zip Code
Wayland MA 01778-1430

FEC ID number of contributing
federal political committee.

C

Name of Employer
Pinnacle Consulting Group

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Transaction ID: 61019.C162503

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Allison Drescher
Mailing Address 840 Summer Street

City State Zip Code
Boston MA 02127

FEC ID number of contributing
federal political committee.

C

Name of Employer
Carriage House Productions

Occupation
Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162575

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

David Elliott

Mailing Address 231 Beacon St.

City State Zip Code
 Boston MA 02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162602

Amount of Each Receipt this Period

250.00

Receipt

B. Full Name (Last, First, Middle Initial)

Robert Fox

Mailing Address 344A Boylston Street

City State Zip Code
 Newton MA 02459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162676

Amount of Each Receipt this Period

1000.00

Receipt

C. Full Name (Last, First, Middle Initial)

Robert Gaffney

Mailing Address 5 Devonshires Court

City State Zip Code
 Blue Bell PA 19422

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 0 / 2 0 0 6

Transaction ID: 61020.C162508

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Robert Goldbaum
Mailing Address 87 Fruitledge Rd.

City State Zip Code
Glen Head NY 11545

FEC ID number of contributing
federal political committee.

C

Name of Employer
Simpson, Thatcher & Bartlett

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162586

Amount of Each Receipt this Period

-2500.00

Memo

[MEMO ITEM]

transfer excess contrib.
from fed to non fed

B. Full Name (Last, First, Middle Initial)
Frank Grimaldi
Mailing Address 55 Worcester Street

City State Zip Code
Belmont MA 02478

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162726

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)
Frederick Hafer
Mailing Address 1010 Waltham Street
Apt. H291

City State Zip Code
Lexington MA 02421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Transaction ID: 61019.C162478

Amount of Each Receipt this Period

100.00

Receipt

SUBTOTAL of Receipts This Page (optional)

600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Thomas Healey

Mailing Address 1 Grove Street

City State Zip Code
 Beverly MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Merrill Lynch

Occupation
VP

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162733

Amount of Each Receipt this Period

2500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Jean Inman

Mailing Address PO Box 735

City State Zip Code
 Stoughton MA 02072

FEC ID number of contributing
federal political committee.

C

Name of Employer
NECNE

Occupation
Educator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162573

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Stephen Ivanoski

Mailing Address 4 Dew Lane

City State Zip Code
 Canton MA 02021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 6

Transaction ID: 61205.C162753

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Ernest Jacquet

Mailing Address 98 1/2 Foster St

City State Zip Code
 Cambridge MA 02138-4825

FEC ID number of contributing federal political committee.

C

Name of Employer
Parthenon CapitalOccupation
Venture Capital

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 6 / 2 0 0 6

Transaction ID: 61205.C162769

Amount of Each Receipt this Period

5000.00

Receipt

B. Full Name (Last, First, Middle Initial)

Dorothy Jenney

Mailing Address 70 Landfall St.

City State Zip Code
 Falmouth MA 02540

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 0 / 2 0 0 6

Transaction ID: 61020.C162510

Amount of Each Receipt this Period

250.00

Receipt

C. Full Name (Last, First, Middle Initial)

Jose Jorge

Mailing Address 118 Inman Street
Apt.1

City State Zip Code
 Cambridge MA 02139

FEC ID number of contributing federal political committee.

C

Name of Employer
RetiredOccupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162721

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Tina Kasimer

Mailing Address 5 Niantic Rd

City State Zip Code
 Sharon MA 02067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Mother

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: 61205.C162734

Amount of Each Receipt this Period

100.00

Receipt

Full Name (Last, First, Middle Initial)

B. Kurt Keilhacker

Mailing Address 10 Meadow Lane

City State Zip Code
 Atherton CA 94027

FEC ID number of contributing
federal political committee.

C

Name of Employer
Techfund

Occupation
Managing Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 2 4 / 2 0 0 6

Transaction ID: 61026.C162563

Amount of Each Receipt this Period

10000.00

Receipt

Full Name (Last, First, Middle Initial)

C. Gloria Kinney

Mailing Address 202 Waltham St

City State Zip Code
 Lexington MA 02421

FEC ID number of contributing
federal political committee.

C

Name of Employer
Homemaker

Occupation
Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162609

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Richard Kobus Mailing Address One Brattle Square City State Zip Code Cambridge MA 02238 FEC ID number of contributing federal political committee. C Name of Employer Tsoi/Kobus and Associates Occupation Architect Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 9 / 2 0 0 6 Transaction ID: 61019.C162501 Amount of Each Receipt this Period 5000.00 Receipt
B. Full Name (Last, First, Middle Initial) Henry Kulik Mailing Address 100 Edman Way Suite S-100 City State Zip Code Leominster MA 01453 FEC ID number of contributing federal political committee. C Name of Employer Henry Kulik Jr CPA LLC Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1250.00			Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6 Transaction ID: 61205.C162732 Amount of Each Receipt this Period 250.00 Receipt
C. Full Name (Last, First, Middle Initial) Kenneth Kumph Mailing Address 35 Nelson Street City State Zip Code Georgetown MA 01833 FEC ID number of contributing federal political committee. C Name of Employer premier builders Occupation President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 15000.00			Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 6 Transaction ID: 61205.C162755 Amount of Each Receipt this Period -5000.00 Memo [MEMO ITEM] transfer excess contrib from fed to non fed accoun nt

SUBTOTAL of Receipts This Page (optional)

5250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

David Leary

Mailing Address 623 Route 6A

City State Zip Code
 Sandwich MA 02537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 0 6

Transaction ID: 61019.C162504

Amount of Each Receipt this Period

50.00

Receipt

B. Full Name (Last, First, Middle Initial)

Merrill Mack

Mailing Address 24 Terrace Rd.

City State Zip Code
 Weston MA 02493

FEC ID number of contributing
federal political committee.

C

Name of Employer
Liberty Mutual

Occupation
Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 0 6 / 2 0 0 6

Transaction ID: 61205.C162775

Amount of Each Receipt this Period

300.00

Receipt

C. Full Name (Last, First, Middle Initial)

Robert Maginn

Mailing Address 90 Raymond Street

City State Zip Code
 Cambridge MA 02140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Jenzabar

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162679

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Christopher Meehan

Mailing Address 51 Bogle Street

City State Zip Code
 Weston MA 02493

FEC ID number of contributing
federal political committee.

C

Name of Employer
ScooterBug

Occupation
Business owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 6

Transaction ID: 61205.C162724

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

James Mooney

Mailing Address 220 Boylston Street

City State Zip Code
 Boston MA 02116

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162639

Amount of Each Receipt this Period

500.00

Receipt

C. Full Name (Last, First, Middle Initial)

Jeffrey Murphy

Mailing Address 203 Woodland Mead

City State Zip Code
 Hamilton MA 01982

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMG

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162631

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Jennifer Nassour

Mailing Address 49 Chelsea St., Unit C1-307

City State Zip Code
 Boston MA 02129

FEC ID number of contributing
federal political committee.

C

Name of Employer
Consigli & Brucato

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 1 / 2 0 0 6

Transaction ID: 61205.C162737

Amount of Each Receipt this Period

150.00

Receipt

Full Name (Last, First, Middle Initial)

B. David Parker

Mailing Address 72 Maple Street

City State Zip Code
 South Hamilton MA 01982

FEC ID number of contributing
federal political committee.

C

Name of Employer
Davio C. Parker, Inc

Occupation
Painting Contractor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 0 6

Transaction ID: 61205.C162793

Amount of Each Receipt this Period

500.00

Receipt

Full Name (Last, First, Middle Initial)

C. Lisa Pearson

Mailing Address 5 Twin Brooks Road

City State Zip Code
 Salisbury MA 01952

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 0 6

Transaction ID: 61205.C162792

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Marion Phillips

Mailing Address 279 North St.

City State Zip Code
 Medfield MA 02052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 0 9 / 2 0 0 6

Transaction ID: 61205.C162790

Amount of Each Receipt this Period

100.00

Receipt

B. Full Name (Last, First, Middle Initial)

Marion Phillips

Mailing Address 279 North St.

City State Zip Code
 Medfield MA 02052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: 61205.C162815

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Jessica Pineo

Mailing Address 208 Lexington Street

City State Zip Code
 Boston MA 02128

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162582

Amount of Each Receipt this Period

10000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Robert Polonsky		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 10 Cornerstone Dr.		Transaction ID: 61205.C162574
City Easton	State MA	Zip Code 02356
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Receipt

B. Full Name (Last, First, Middle Initial) Michael Porter		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 44 Green Hill Rd.		Transaction ID: 61205.C162584
City Brookline	State MA	Zip Code 02445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Harvard University	Occupation Professor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Receipt

C. Full Name (Last, First, Middle Initial) Donna Reardon		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 71 Pitcairn Street		Transaction ID: 61205.C162579
City Revere	State MA	Zip Code 02151
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer MS Transp. Systems Inc.	Occupation Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Victor Rifkin		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 595 Grove Street		Transaction ID: 61205.C162637
City Newton	State MA	Zip Code 02162
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 500.00	

Receipt

B. Full Name (Last, First, Middle Initial) Richard Warren Russell		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address PO Box 638		Transaction ID: 61205.C162677
City Dover	State MA	Zip Code 02030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Information Requested Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Information Requested Aggregate Year-to-Date ▼ 400.00	

Receipt

C. Full Name (Last, First, Middle Initial) Jonathan Sandler		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 1 / 2 0 0 6
Mailing Address 5 Black Oak Road		Transaction ID: 61205.C162723
City Wayland	State MA	Zip Code 01778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer Kessler Financial Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Aggregate Year-to-Date ▼ 2500.00	

Receipt

SUBTOTAL of Receipts This Page (optional)

3400.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

William Scully

Mailing Address PO Box 967

City State Zip Code
 Framingham MA 01701

FEC ID number of contributing
federal political committee.

C

Name of Employer
MS Transportation Systems

Occupation
transportation/ civil engineer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162570

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Robert Semonian

Mailing Address 11 Howe Street

City State Zip Code
 Watertown MA 02472

FEC ID number of contributing
federal political committee.

C

Name of Employer
Improper Publications Inc.

Occupation
Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162577

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Thaddeus Siemasko

Mailing Address 126 Dodge Street

City State Zip Code
 Beverly MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer
Siemasko & Verbridge

Occupation
Architect

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 2 7 / 2 0 0 6

Transaction ID: 61205.C162810

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial) Robert Spence		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 83 E. Water Street- PO Box C		Transaction ID: 61205.C162604
City Rockland	State MA	Zip Code 02370
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) John Stimpson		Date of Receipt M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 0 6
Mailing Address 331 Mirick Road		Transaction ID: 61205.C162580
City Princeton	State MA	Zip Code 01541
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C. Full Name (Last, First, Middle Initial) Matthew Straight		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 0 6
Mailing Address 520 Main St		Transaction ID: 61019.C162494
City Fitchburg	State MA	Zip Code 01420
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RE Developer	Occupation Self employed	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)

1100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Mimi Sundstrom

Mailing Address 66 Allerton Rd.

City State Zip Code
Milton MA 02186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
banker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: 61020.C162509

Amount of Each Receipt this Period

125.00

Receipt

B. Full Name (Last, First, Middle Initial)

Raymond Timmons

Mailing Address 118 Driftwood Lane

City State Zip Code
Yarmouth MA 02664

FEC ID number of contributing
federal political committee.

C

Name of Employer
GTR Manufacturing Corp.

Occupation
Business owner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162605

Amount of Each Receipt this Period

100.00

Receipt

C. Full Name (Last, First, Middle Initial)

Raymond Tye

Mailing Address 175 Campanelli Drive

City State Zip Code
Braintree MA 02184

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Liquors, Ltd.

Occupation
Business Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 6

Transaction ID: 61026.C162561

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 75

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)

Penny Valentine

Mailing Address 15 Kress Farm Road

City State Zip Code
Hingham MA 02043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 6

Transaction ID: 61020.C162506

Amount of Each Receipt this Period

500.00

Receipt

B. Full Name (Last, First, Middle Initial)

Jean Verbridge

Mailing Address 12 Gallison Ave

City State Zip Code
Marblehead MA 01945

FEC ID number of contributing
federal political committee.

C

Name of Employer
Siemasko & Verbridge

Occupation
Designer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 0 / 2 0 0 6

Transaction ID: 61205.C162674

Amount of Each Receipt this Period

5000.00

Receipt

C. Full Name (Last, First, Middle Initial)

D. Bradford Wetherell

Mailing Address 47 Fresh Pond Ln.

City State Zip Code
Cambridge MA 02138

FEC ID number of contributing
federal political committee.

C

Name of Employer
Romney for President

Occupation
Policy Advisor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 9 / 2 0 0 6

Transaction ID: 61019.C162477

Amount of Each Receipt this Period

150.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5650.00

TOTAL This Period (last page this line number only)

105225.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 75

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Greenberg Traurig Pac

Mailing Address 1221 Brickell Ave

City	State	Zip Code
Miami	FL	33131

FEC ID number of contributing
federal political committee.**C** C00266585Name of Employer
Fed ID C00266585

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	4		2	0	0	6

Transaction ID: 61026.C162562

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 75

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

A. Full Name (Last, First, Middle Initial)
Communication, Inc. Majority

Mailing Address 274 Marconi Blvd. Suite 260

City State Zip Code
Columbus OH 43215-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.35

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 6

Transaction ID: 61205.C162780

Amount of Each Receipt this Period

202.35

Offsets to Operating Expe-
nditu

Note: refund for excess
payment on previous mail-
ing from 10/22

B. Full Name (Last, First, Middle Initial)
Communication, Inc. Majority

Mailing Address 274 Marconi Blvd. Suite 260

City State Zip Code
Columbus OH 43215-

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.35

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 7 / 2 0 0 6

Transaction ID: 61205.C162811

Amount of Each Receipt this Period

18.00

Offsets to Operating Expe-
nditu

Note: refund for over pay-
ment

SUBTOTAL of Receipts This Page (optional)

220.35

TOTAL This Period (last page this line number only)

220.35

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 32 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Affiliated Managers Group Inc.

Mailing Address 600 Hale St.

City
Beverly

State
MA

Zip Code
01965-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9343

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

802.50

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

B. Rhonda Avola

Mailing Address 306 Main St. Unit 10

City
Melrose

State
MA

Zip Code
02176-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9334

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

957.00

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

C. Rhonda Avola

Mailing Address 306 Main St. Unit 10

City
Melrose

State
MA

Zip Code
02176-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9447

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

1056.00

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

SUBTOTAL of Disbursements This Page (optional)

2815.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 33 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement

B.BARBERS REIMBURSEMENT FOR PERSONAL CA

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 61205.E9325

Date of Disbursement

/ /

Amount of Each Disbursement this Period

245.53

**B.BARBERS REIMBURSEMENT
FOR PERSONAL CAR USAGE**

Full Name (Last, First, Middle Initial)

B. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement

REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 61205.E9440

Date of Disbursement

/ /

Amount of Each Disbursement this Period

326.40

REIMBURSEMENT : SEE BELOW

Full Name (Last, First, Middle Initial)

C. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City
Windham

State
NH

Zip Code
03087-

Purpose of Disbursement

B.BARBER REIMBURSEMENT FOR PERSONAL CAR

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID: 61205.E9441

Date of Disbursement

/ /

Amount of Each Disbursement this Period

326.40

[MEMO ITEM]

**MEMO: B.BARBER REIMBURSEM-
ENT FOR PERSONAL CAR USE
MILEAGE**

SUBTOTAL of Disbursements This Page (optional)

571.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 34 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Maeve Bowman

Mailing Address 404 Commercial St. Apt 2

City Boston State MA Zip Code 02109-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9338

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

107.25

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

B. Maeve Bowman

Mailing Address 404 Commercial St. Apt 2

City Boston State MA Zip Code 02109-

Purpose of Disbursement
ADMINISTRATION SERVICES NON-FEA NO FEDE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9444

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

231.00

ADMINISTRATION SERVICES
NON-FEA NO FEDERAL CANDID-
ATE

Full Name (Last, First, Middle Initial)

C. Abby Brack Photography

Mailing Address 19 Sheafe St.

City Boston State MA Zip Code 02113-

Purpose of Disbursement
PHOTOGRAPHY FOR PARTY EVENT NON-FEA NO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9386

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

315.00

PHOTOGRAPHY FOR PARTY EVE-
NT NON-FEA NO FEDERAL CAN-
DIDATE

SUBTOTAL of Disbursements This Page (optional)

653.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 35 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Cambridge Offset Printing

Mailing Address 56 Creighton Street

City Cambridge State MA Zip Code 02140-

Purpose of Disbursement
GENERAL PRINTING NON-FEA NO FEDERAL CAN

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9342

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

5300.57

GENERAL PRINTING NON-FEA
NO FEDERAL CANDIDATE

Full Name (Last, First, Middle Initial)

B. Csx Castle Self-Storage

Mailing Address 39 Old Colony Ave.

City Boston State MA Zip Code 02127-

Purpose of Disbursement
STORAGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9353

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

289.12

STORAGE

Full Name (Last, First, Middle Initial)

C. Conference Call Conference Call.

Mailing Address 1445 MacArthur Dr.
Suite 214

City Carrollton State TX Zip Code 75007-

Purpose of Disbursement
CONFERENCE CALL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9341

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

290.87

CONFERENCE CALL

SUBTOTAL of Disbursements This Page (optional)

5880.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. CPMA, Inc.

Mailing Address 84 Prescott St.
Suite 21

City Cambridge State MA Zip Code 02138-

Purpose of Disbursement
POLITICAL CONSULTING NON-FEA POLITICAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9340

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

5000.00

POLITICAL CONSULTING NO-
N-FEA POLITICAL CONSULTING
ADVICE

Full Name (Last, First, Middle Initial)

B. Crowne Plaza Natick

Mailing Address 1360 Worcester Rd.

City Natick State MA Zip Code 01760-

Purpose of Disbursement
ROOM RENTAL FOR MEETING NON-FEA NO FED

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9392

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

1456.01

ROOM RENTAL FOR MEETING
NON-FEA NO FED CANDIDATES

Full Name (Last, First, Middle Initial)

C. Hui Jojo Deng

Mailing Address 117 Beaconsfield Road

City Brookline State MA Zip Code 02445-

Purpose of Disbursement
ACCOUNTING SERVICE- GENERAL ACCOUNTING N

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9367

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

957.00

ACCOUNTING SERVICE- GENER-
AL ACCOUNTING NON-FEA

SUBTOTAL of Disbursements This Page (optional)

7413.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Donna Deprisco

Mailing Address 160 Commonwealth Ave

City Boston State MA Zip Code 02116-

Purpose of Disbursement
TROPHY/ AWARD FOR RECEPTION

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.C162812IK

Date of Disbursement

11 / 27 / 2006

Amount of Each Disbursement this Period

450.00

IN KIND: TROPHY/ AWARD FOR RECEPTION

Full Name (Last, First, Middle Initial)

B. Brian Dodge

Mailing Address 10 Parker Road

City Groveland State MA Zip Code 01834-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9432

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

228.90

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Boston Beer Work

Mailing Address 112 Canal St.

City Boston State MA Zip Code 02114-

Purpose of Disbursement
B.DODGE REIMBURSEMENT FOR MEAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9433

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

113.45

[MEMO ITEM]

MEMO: B.DODGE REIMBURSEMENT FOR MEAL

SUBTOTAL of Disbursements This Page (optional)

678.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 38 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. ENlisson ENilsson

Mailing Address 6 Depot Street

City
Westford

State
MA

Zip Code
01886-

Purpose of Disbursement
WEBHOSTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9339

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

4577.00

WEBHOSTING

Full Name (Last, First, Middle Initial)

B. Federal Express (Fed Ex)

Mailing Address PO Box 371461

City
Pittsburgh

State
PA

Zip Code
15250-

Purpose of Disbursement
EXPRESS MAIL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9346

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

114.76

EXPRESS MAIL

Full Name (Last, First, Middle Initial)

C. Fleet Bank

Mailing Address 100 Federal Street

City
Boston

State
MA

Zip Code
02110-

Purpose of Disbursement
BANK SERVICE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9399

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

5.00

BANK SERVICE CHARGE

SUBTOTAL of Disbursements This Page (optional)

4696.76

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 39 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Fleet Bank

Mailing Address 100 Federal Street

City
Boston

State
MA

Zip Code
02110-

Purpose of Disbursement
BANK SERVICE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9398

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

112.00

BANK SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. Guardian Guardian

Mailing Address Boston Group Office
1 Liberty Square

City
Boston

State
MA

Zip Code
02109-

Purpose of Disbursement
INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9283

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

649.67

INSURANCE

Full Name (Last, First, Middle Initial)

C. HPH Inc. Harvard Pilgram Heal

Mailing Address 1200 Crown Colony Dr.

City
Quincy

State
MA

Zip Code
02169-

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9354

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

5301.23

HEALTH INSURANCE

SUBTOTAL of Disbursements This Page (optional)

6062.90

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 40 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9329

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

67.32

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

Full Name (Last, First, Middle Initial)

B. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9355

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

77.84

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

Full Name (Last, First, Middle Initial)

C. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9391

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

77.32

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

SUBTOTAL of Disbursements This Page (optional)

222.48

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 41 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9434

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

60.00

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

Full Name (Last, First, Middle Initial)

B. Samantha Levine

Mailing Address 15 Oak St.

City Chestnut Hill State MA Zip Code 02467-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9326

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

264.92

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Garage Government Center

Mailing Address 50 New Sudbury Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
S.LEVINE REIMBURSEMENT FOR PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9328

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

205.00

[MEMO ITEM]

MEMO: S.LEVINE REIMBURSEM-
ENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)

324.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 42 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVELL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9356

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

61.00

REIMBURSEMENT FOR TRAVELL

Full Name (Last, First, Middle Initial)

B. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9374

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

131.92

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Garage Government Center

Mailing Address 50 New Sudbury Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
S.LEVINE REIMBURSEMENT FOR PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9375

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

57.00

[MEMO ITEM]

MEMO: S.LEVINE REIMBURSEM-
ENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)

192.92

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 43 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Samantha Levine

Mailing Address 15 Oak St.

City Chestnut Hill State MA Zip Code 02467-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9435

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

133.98

REIMBURSEMENT FOR PARKING TRAVEL FOOD

Full Name (Last, First, Middle Initial)

B. Samantha Levine

Mailing Address 15 Oak St.

City Chestnut Hill State MA Zip Code 02467-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9448

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

230.50

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9396

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

22.61

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

387.09

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 44 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9395

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

25.75

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD DEBIT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70102.E9465

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

1079.72

CREDIT CARD DEBIT

Full Name (Last, First, Middle Initial)

C. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70102.E9466

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

25.00

CREDIT CARD FEE

SUBTOTAL of Disbursements This Page (optional)

1130.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9394

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

125.43

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

B. Merchants Bankcard

Mailing Address Fleet Bank
100 Federal Street

City Boston State MA Zip Code 02110-

Purpose of Disbursement
CREDIT CARD FEE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 70102.E9467

Date of Disbursement

11 / 09 / 2006

Amount of Each Disbursement this Period

50.00

CREDIT CARD FEE

Full Name (Last, First, Middle Initial)

C. mindShift Technologies, Inc.

Mailing Address PO Box 200105

City Pittsburgh State PA Zip Code 15251-

Purpose of Disbursement
COMPUTER NETWORK SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9337

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

2529.35

COMPUTER NETWORK SERVICES

SUBTOTAL of Disbursements This Page (optional)

2704.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ox-Eye Properties

Mailing Address c/o Massey & Co.
85 Merrimac Street

City Boston State MA Zip Code 02114-

Purpose of Disbursement
RENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9445

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

5523.67

RENT

Full Name (Last, First, Middle Initial)

B. Paychex/InterPay

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9249

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

7949.38

PAYROLL-TAXES

Full Name (Last, First, Middle Initial)

C. Paychex/InterPay

Mailing Address PO Box 8295

City Boston State MA Zip Code 02266-

Purpose of Disbursement
PAYROLL-401 K

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9250

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

673.07

PAYROLL-401 K

SUBTOTAL of Disbursements This Page (optional)

14146.12

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL SERVICE CHARGE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9384

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

160.00

PAYROLL SERVICE CHARGE

Full Name (Last, First, Middle Initial)

B. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL TAXES - QUARTERLY

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9397

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

1215.39

PAYROLL TAXES - QUARTERLY

Full Name (Last, First, Middle Initial)

C. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9296

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

7953.46

PAYROLL-TAXES

SUBTOTAL of Disbursements This Page (optional)

9328.85

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 48 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL - 401 K

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9297

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

673.07

PAYROLL - 401 K

Full Name (Last, First, Middle Initial)

B. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9282

Date of Disbursement

11 / 10 / 2006

Amount of Each Disbursement this Period

92.86

PAYROLL SERVICE

Full Name (Last, First, Middle Initial)

C. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-401 K

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9413

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

673.07

PAYROLL-401 K

SUBTOTAL of Disbursements This Page (optional)

1439.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 49 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Paychex/InterPay

Mailing Address PO Box 8295

City
Boston

State
MA

Zip Code
02266-

Purpose of Disbursement
PAYROLL-TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9412

Date of Disbursement

/ /

Amount of Each Disbursement this Period

7953.46

PAYROLL-TAXES

Full Name (Last, First, Middle Initial)

B. Poland Spring Poland Spring

Mailing Address Processing Center
PO Box 52271

City
Phoenix

State
AZ

Zip Code
85072-

Purpose of Disbursement
BOTTLE WATER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9336

Date of Disbursement

/ /

Amount of Each Disbursement this Period

68.07

BOTTLE WATER

Full Name (Last, First, Middle Initial)

C. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City
Quincy

State
MA

Zip Code
02169-

Purpose of Disbursement
REIMBSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9330

Date of Disbursement

/ /

Amount of Each Disbursement this Period

210.45

REIMBSEMENT FOR PARKING
TRAVEL FOOD

SUBTOTAL of Disbursements This Page (optional)

8231.98

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 50 / 75

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ruth Rice

Mailing Address 30 Fernview Apt 1

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9439

Date of Disbursement

/ /

Amount of Each Disbursement this Period

32.00

REIMBURSEMENT FOR PARKING

Full Name (Last, First, Middle Initial)

B. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City
Waltham

State
MA

Zip Code
02453-

Purpose of Disbursement
REIMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9376

Date of Disbursement

/ /

Amount of Each Disbursement this Period

586.35

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Laz Parking Ltd.

Mailing Address 101 Merrimac Street

City
Boston

State
MA

Zip Code
02114-

Purpose of Disbursement
S.ROCHE REIMBURSEMENT FOR PARKING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9377

Date of Disbursement

/ /

Amount of Each Disbursement this Period

375.00

[MEMO ITEM]

MEMO: S.ROCHE REIMBURSEMENT FOR PARKING

SUBTOTAL of Disbursements This Page (optional)

618.35

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 51 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Sprint/Nextel

Mailing Address PO Box 17990

City State Zip Code
Denver CO 80217-

Purpose of Disbursement
S.ROCHE REIMBURSEMENT FOR CELL PHONE CAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9378

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

134.65

[MEMO ITEM]

MEMO: S.ROCHE REIMBURSEMENT FOR CELL PHONE CALLS

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City State Zip Code
Wayland MA 01778-

Purpose of Disbursement
REMBURSEMENT: SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9368

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1983.89

REMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

C. Boston Beer Work

Mailing Address 112 Canal St.

City State Zip Code
Boston MA 02114-

Purpose of Disbursement
M.ROWE REIMBURSEMENT FOR FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9372

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

170.19

[MEMO ITEM]

MEMO: M.ROWE REIMBURSEMENT FOR FOOD

SUBTOTAL of Disbursements This Page (optional)

1983.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 52 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Seafood Legal

Mailing Address 255 State St.

City
Boston

State
MA

Zip Code
02108-

Purpose of Disbursement
M.ROWE REIMBURSEMENT FOR FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9371

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

962.48

[MEMO ITEM]

MEMO: M.ROWE REIMBURSEMENT FOR FOOD

Full Name (Last, First, Middle Initial)

B. Verizon Verizon Wireless

Mailing Address PO Box 5029

City
Wallingford

State
CT

Zip Code
06492-

Purpose of Disbursement
M.ROWE REIMBURSEMENT FOR CELL PHONE CALL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9369

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

173.16

[MEMO ITEM]

MEMO: M.ROWE REIMBURSEMENT FOR CELL PHONE CALLS

Full Name (Last, First, Middle Initial)

C. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City
Boston

State
MA

Zip Code
02132-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9381

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

197.31

REIMBURSEMENT FOR PARKING TRAVEL FOOD

SUBTOTAL of Disbursements This Page (optional)

197.31

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 53 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9344

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

460.00

REIMBURSEMENT : SEE BELOW

Full Name (Last, First, Middle Initial)

B. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
E.SARRAMIS REIMBURSEMENT FOR PERSONAL C

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9345

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

460.00

[MEMO ITEM]

MEMO: E.SARRAMIS REIMBURSEMENT FOR PERSONAL CAR USAGE

Full Name (Last, First, Middle Initial)

C. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9388

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

154.40

REIMBURSEMENT : SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

614.40

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 54 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
E.SARRAMIS REIMBURSEMENT FOR PERSONAL C

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9389

Date of Disbursement

11 / 06 / 2006

Amount of Each Disbursement this Period

154.40

[MEMO ITEM]

MEMO: E.SARRAMIS REIMBURSEMENT FOR PERSONAL CAR USAGE

Full Name (Last, First, Middle Initial)

B. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9442

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

213.60

REIMBURSEMENT : SEE BELOW

Full Name (Last, First, Middle Initial)

C. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
E.SARRAMI REIMBURSEMENT FOR PERSONAL CAR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9443

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

213.60

[MEMO ITEM]

MEMO: E.SARRAMI REIMBURSEMENT FOR PERSONAL CAR USE MILEAGE

SUBTOTAL of Disbursements This Page (optional)

213.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 55 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. SCM Associates

Mailing Address Steve Meyers
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement
DIRECT MAIL AND TELEMARKEING NON FEA N

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9333

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

6571.02

DIRECT MAIL AND TELEMARKE-
TING NON FEA NO FED CANDI-
DATE

Full Name (Last, First, Middle Initial)

B. SCM Associates

Mailing Address Steve Meyers
PO Box 720

City Jaffrey State NH Zip Code 03452-

Purpose of Disbursement
DIRECT MAIL AND TELEMARKEING NON FEA N

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9349

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

5344.94

DIRECT MAIL AND TELEMARKE-
TING NON FEA NO FED CANDI-
DATE

Full Name (Last, First, Middle Initial)

C. Sheraton Boston

Mailing Address 39 Dalton St.

City Boston State MA Zip Code 02199-

Purpose of Disbursement
EVENT CATERING & ROOM RENTAL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9366

Date of Disbursement

11 / 01 / 2006

Amount of Each Disbursement this Period

3300.00

EVENT CATERING & ROOM REN-
TAL

SUBTOTAL of Disbursements This Page (optional)

15215.96

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 56 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Staples, Inc.

Mailing Address Staples Credit Plan
Dept. 80 - 0088936796

City Des Moines State IA Zip Code 50368-9020

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9350

Date of Disbursement

10 / 26 / 2006

Amount of Each Disbursement this Period

952.60

OFFICE SUPPLIES

Full Name (Last, First, Middle Initial)

B. Matthew Talancy

Mailing Address 445 Malden St.

City Holden State MA Zip Code 01520-

Purpose of Disbursement
REIMBURSEMENT FOR PERSONAL CAR USE MILEA

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9323

Date of Disbursement

10 / 23 / 2006

Amount of Each Disbursement this Period

178.90

REIMBURSEMENT FOR PERSONAL
CAR USE MILEAGE

Full Name (Last, First, Middle Initial)

C. Matthew Talancy

Mailing Address 445 Malden St.

City Holden State MA Zip Code 01520-

Purpose of Disbursement
REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9379

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

564.78

REIMBURSEMENT : SEE BELOW

SUBTOTAL of Disbursements This Page (optional)

1696.28

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 57 / 75

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Matthew Talancy

Mailing Address 445 Malden St.

City
Holden

State
MA

Zip Code
01520-

Purpose of Disbursement
M.TALANCY REIMBURSEMENT FOR PERSONAL CAR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9380

Date of Disbursement

/ /

Amount of Each Disbursement this Period

516.00

[MEMO ITEM]

MEMO: M.TALANCY REIMBURSE-
MENT FOR PERSONAL CAR USA-
GE

Full Name (Last, First, Middle Initial)

B. Matthew Talancy

Mailing Address 445 Malden St.

City
Holden

State
MA

Zip Code
01520-

Purpose of Disbursement
REIMBURSEMENT : SEE BELOW

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9436

Date of Disbursement

/ /

Amount of Each Disbursement this Period

384.80

REIMBURSEMENT : SEE BELOW

Full Name (Last, First, Middle Initial)

C. Matthew Talancy

Mailing Address 445 Malden St.

City
Holden

State
MA

Zip Code
01520-

Purpose of Disbursement
M.TALANCY REIMBURSEMENT FOR PERSONAL CAR

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9437

Date of Disbursement

/ /

Amount of Each Disbursement this Period

379.60

[MEMO ITEM]

MEMO: M.TALANCY REIMBURSE-
MENT FOR PERSONAL CAR USE
MILEAGE

SUBTOTAL of Disbursements This Page (optional)

384.80

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 58 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Matthew Talancy

Mailing Address 445 Malden St.

City State Zip Code
Holden MA 01520-

Purpose of Disbursement
REIMBURSEMENT FOR PARKING TRAVEL FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9438

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50.00

REIMBURSEMENT FOR PARKING
TRAVEL FOOD

Full Name (Last, First, Middle Initial)

B. USground USground

Mailing Address PO Box 130349

City State Zip Code
Boston MA 02113-

Purpose of Disbursement
COURIER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9332

Date of Disbursement

/ /

Amount of Each Disbursement this Period

47.63

COURIER

Full Name (Last, First, Middle Initial)

C. USground USground

Mailing Address PO Box 130349

City State Zip Code
Boston MA 02113-

Purpose of Disbursement
COURIER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9352

Date of Disbursement

/ /

Amount of Each Disbursement this Period

6.90

COURIER

SUBTOTAL of Disbursements This Page (optional)

104.53

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 59 / 75

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Robert Willington

Mailing Address 12 Arlington Street

City
Reading

State
MA

Zip Code
01867-

Purpose of Disbursement
REIMBURSEMENT FOR TRAVEL AND FOOD

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9348

Date of Disbursement

/ /

Amount of Each Disbursement this Period

106.00

REIMBURSEMENT FOR TRAVEL
AND FOOD

SUBTOTAL of Disbursements This Page (optional)

106.00

TOTAL This Period (last page this line number only)

88016.54

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 60 / 75

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
R.GOLDBAUM TRANSFER EXCESS CONTRIB FROM

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61205.E9280

Date of Disbursement

10 / 30 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mass Republican State Committee

Mailing Address 85 Merrimac Street
Suite 400

City Boston State MA Zip Code 02114-

Purpose of Disbursement
K.KUMPH TRANS. EXCESS CONTRIB FROM FED

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61205.E9281

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

7500.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 61 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City Windham State NH Zip Code 03087-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9236

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

1018.36

PAYROLL

Full Name (Last, First, Middle Initial)

B. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City Windham State NH Zip Code 03087-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9284

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1018.36

PAYROLL

Full Name (Last, First, Middle Initial)

C. Brandon Barber

Mailing Address 106 Kendall Pond Rd.

City Windham State NH Zip Code 03087-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9400

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

1018.36

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3055.08

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9237

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2020.75

PAYROLL

Full Name (Last, First, Middle Initial)

B. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9285

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2020.75

PAYROLL

Full Name (Last, First, Middle Initial)

C. Brian Dodge

Mailing Address 10 Parker Road

City
Groveland

State
MA

Zip Code
01834-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9401

Date of Disbursement

/ /

Amount of Each Disbursement this Period

2020.75

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

6062.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 63 / 75

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Bruce Harrison

Mailing Address 101 Elm St

City Wakefield State MA Zip Code 01880-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9450

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE

Full Name (Last, First, Middle Initial)

B. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9238

Date of Disbursement

/ /

Amount of Each Disbursement this Period

969.61

PAYROLL

Full Name (Last, First, Middle Initial)

C. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9286

Date of Disbursement

/ /

Amount of Each Disbursement this Period

969.61

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2939.22

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 64 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Lyndsay Jones

Mailing Address 95 West Squantum St. #605

City North Quincy State MA Zip Code 02171-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9402

Date of Disbursement

/ /

Amount of Each Disbursement this Period

969.61

PAYROLL

Full Name (Last, First, Middle Initial)

B. Samantha Levine

Mailing Address 15 Oak St.

City Chestnut Hill State MA Zip Code 02467-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9239

Date of Disbursement

/ /

Amount of Each Disbursement this Period

891.73

PAYROLL

Full Name (Last, First, Middle Initial)

C. Samantha Levine

Mailing Address 15 Oak St.

City Chestnut Hill State MA Zip Code 02467-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9287

Date of Disbursement

/ /

Amount of Each Disbursement this Period

891.73

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2753.07

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 65 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Samantha Levine

Mailing Address 15 Oak St.

City
Chestnut Hill

State
MA

Zip Code
02467-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9403

Date of Disbursement

/ /

Amount of Each Disbursement this Period

891.73

PAYROLL

Full Name (Last, First, Middle Initial)

B. Reid Morrison

Mailing Address 180 Beacon St.
Unit 18C

City
Boston

State
MA

Zip Code
02116-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9335

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE

Full Name (Last, First, Middle Initial)

C. Reid Morrison

Mailing Address 180 Beacon St.
Unit 18C

City
Boston

State
MA

Zip Code
02116-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9347

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE

SUBTOTAL of Disbursements This Page (optional)

1291.73

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 66 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Reid Morrison

Mailing Address 180 Beacon St.
Unit 18C

City Boston State MA Zip Code 02116-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9373

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

**PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE**

Full Name (Last, First, Middle Initial)

B. Reid Morrison

Mailing Address 180 Beacon St.
Unit 18C

City Boston State MA Zip Code 02116-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9390

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

**PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE**

Full Name (Last, First, Middle Initial)

C. Reid Morrison

Mailing Address 180 Beacon St.
Unit 18C

City Boston State MA Zip Code 02116-

Purpose of Disbursement
PAYROLL - ADMINISTRATIVE SUPPORT SERVICE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9446

Date of Disbursement

/ /

Amount of Each Disbursement this Period

160.00

**PAYROLL - ADMINISTRATIVE
SUPPORT SERVICE**

SUBTOTAL of Disbursements This Page (optional)

560.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 67 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City Quincy State MA Zip Code 02169-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61019.E9240

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

1319.26

PAYROLL

Full Name (Last, First, Middle Initial)

B. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City Quincy State MA Zip Code 02169-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61205.E9288

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1319.26

PAYROLL

Full Name (Last, First, Middle Initial)

C. Jinara Reyes

Mailing Address 66 Greenleaf St.
Apt. # 33

City Quincy State MA Zip Code 02169-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 61205.E9404

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

1319.26

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3957.78

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 68 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ruth Rice

Mailing Address 30 Fernview Apt 1

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9242

Date of Disbursement

/ /

Amount of Each Disbursement this Period

912.81

PAYROLL

Full Name (Last, First, Middle Initial)

B. Ruth Rice

Mailing Address 30 Fernview Apt 1

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9289

Date of Disbursement

/ /

Amount of Each Disbursement this Period

912.81

PAYROLL

Full Name (Last, First, Middle Initial)

C. Ruth Rice

Mailing Address 30 Fernview Apt 1

City
North Andover

State
MA

Zip Code
01845-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9405

Date of Disbursement

/ /

Amount of Each Disbursement this Period

912.81

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2738.43

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City Waltham State MA Zip Code 02453-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9243

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

3033.54

PAYROLL

Full Name (Last, First, Middle Initial)

B. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City Waltham State MA Zip Code 02453-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9290

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

3033.54

PAYROLL

Full Name (Last, First, Middle Initial)

C. Steven Roche

Mailing Address 70 Hope Ave. Apt 302

City Waltham State MA Zip Code 02453-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9406

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

3033.54

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

9100.62

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 70 / 75

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9244

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1479.43

PAYROLL

Full Name (Last, First, Middle Initial)

B. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9291

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1479.43

PAYROLL

Full Name (Last, First, Middle Initial)

C. Mark Rowe

Mailing Address 216 W. Plain St.

City
Wayland

State
MA

Zip Code
01778-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9407

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1479.43

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4438.29

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 71 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City Boston State MA Zip Code 02132-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9245

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

2145.71

PAYROLL

Full Name (Last, First, Middle Initial)

B. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City Boston State MA Zip Code 02132-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9292

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

2145.71

PAYROLL

Full Name (Last, First, Middle Initial)

C. Priscilla Ruzzo

Mailing Address 85 Overlook Road

City Boston State MA Zip Code 02132-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9408

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

2145.71

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

6437.13

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 72 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9246

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

967.03

PAYROLL

Full Name (Last, First, Middle Initial)

B. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9293

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

962.95

PAYROLL

Full Name (Last, First, Middle Initial)

C. Ensieh Sarraami

Mailing Address 9214 Inglewood Dr.

City Potomac State MD Zip Code 20854-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9409

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

962.95

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2892.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 73 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Matthew Talancy

Mailing Address 445 Malden St.

City State Zip Code
Holden MA 01520-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9247

Date of Disbursement

/ /

Amount of Each Disbursement this Period

939.31

PAYROLL

Full Name (Last, First, Middle Initial)

B. Matthew Talancy

Mailing Address 445 Malden St.

City State Zip Code
Holden MA 01520-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9294

Date of Disbursement

/ /

Amount of Each Disbursement this Period

939.31

PAYROLL

Full Name (Last, First, Middle Initial)

C. Matthew Talancy

Mailing Address 445 Malden St.

City State Zip Code
Holden MA 01520-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9410

Date of Disbursement

/ /

Amount of Each Disbursement this Period

939.31

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

2817.93

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 74 / 75

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Massachusetts Republican State Congressional Committee

Full Name (Last, First, Middle Initial)

A. Robert Willington

Mailing Address 12 Arlington Street

City Reading State MA Zip Code 01867-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61019.E9248

Date of Disbursement

10 / 19 / 2006

Amount of Each Disbursement this Period

1227.36

PAYROLL

Full Name (Last, First, Middle Initial)

B. Robert Willington

Mailing Address 12 Arlington Street

City Reading State MA Zip Code 01867-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9295

Date of Disbursement

11 / 02 / 2006

Amount of Each Disbursement this Period

1227.36

PAYROLL

Full Name (Last, First, Middle Initial)

C. Robert Willington

Mailing Address 12 Arlington Street

City Reading State MA Zip Code 01867-

Purpose of Disbursement
PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 61205.E9411

Date of Disbursement

11 / 16 / 2006

Amount of Each Disbursement this Period

1227.36

PAYROLL

SUBTOTAL of Disbursements This Page (optional)

3682.08

TOTAL This Period (last page this line number only)

52726.54

Image# 27990012737

Form/Schedule: **F3XA**

Transaction ID: **C00042622**

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED ANY FEDERAL CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY IS REQUIRED TO BE REPORTED ON SCHEDULES B, E, OR F. All donors who have contributed \$200 or more were sent a letter within 30 days asking for employer-occupation if one was not provided in order to meet best efforts policy. ** This amendment corrects the typing error in the previous cash on hand as well as an oversight in disbursements**
